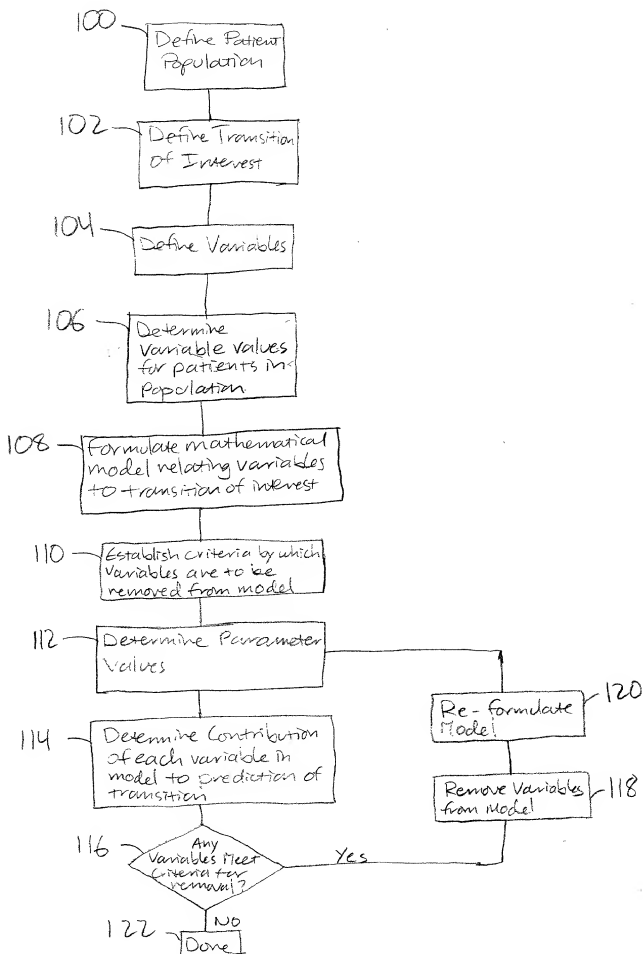


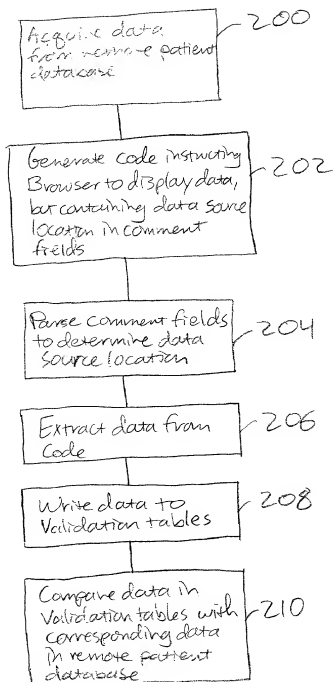
Fig. 1

Fig. 2

Variable	Variable Name*	Variable Categorization
High Cost in Index Year	HC	1: High Cost 0: Not High Cost
Total Cholesterol	TC ₁ , TC ₂ , TC ₃	0: < 240 and compliant 1: Non-compliant 2: ≥ 240 and compliant
LDL Cholesterol	LC ₁ , LC ₂ , LC ₃	0: < 160 and compliant 1: Non-compliant 2: ≥ 160 and compliant
Creatinine	CR ₁ , CR ₂ , CR ₃	0: < 48.3 and compliant 1: Non-compliant 2: ≥ 48.3 and compliant
Microalbumin	MA ₁ , MA ₂ , MA ₃	0: < 30 and compliant 1: Non-compliant 2: ≥ 30 and < 300 and compliant 3: ≥ 300 and compliant
Hemoglobin A1C	HB ₁ , HB ₂ , HB ₃	0: < 7.5 and compliant 1: Non-compliant 2: ≥ 7.5 and Compliant
PCP Compliance	PCP ₁ , PCP ₂ , PCP ₃	0: Compliant 1: Non-compliant
Ophthalmology Compliance	OP ₁ , OP ₂ , OP ₃	0: Compliant 1: Non-compliant
Gender	GEN	0: Male 1: Female
Age	AGE	0: < 45 1: ≥ 45 and < 65 2: ≥ 65
Number of Severe Inpatient Diagnoses	NS	0: 0 diagnoses 1: 1 or 2 diagnoses 2: > 2 diagnoses
Cost in TP ₃	CS	NA (continuous)

Patient Number	1	2	3	4	5	6	7	8	9	10
HC	0	1	1	0	0	0	0	0	0	0
TC ₁	0	1	1	1	1	0	0	1	0	1
TC ₂	0	0	0	0	1	0	0	0	0	0
TC ₃	0	1	1	0	1	2	0	0	0	0
LC ₁	0	1	1	1	1	0	0	1	0	1
LC ₂	0	0	0	0	1	2	0	0	0	0
LC ₃	0	1	1	0	1	2	0	0	0	0
CR ₁	1	1	1	1	1	1	1	1	1	1
CR ₂	1	1	1	1	0	1	1	1	1	1
CR ₃	0	1	1	2	1	1	1	0	1	1
MA ₁	0	1	1	1	1	1	1	1	1	1
MA ₂	1	2	3	0	1	1	1	1	1	0
MA ₃	0	2	1	0	1	2	1	2	2	0
PCP ₁	1	1	1	1	0	1	1	1	0	1
HB ₁	0	1	1	1	1	2	2	1	2	2
HB ₂	0	0	2	2	1	1	2	0	2	2
HB ₃	0	1	2	2	1	2	2	0	2	0
PCP ₂	1	1	1	1	0	1	1	1	0	1
PCP ₃	1	1	1	1	0	1	1	1	1	1
OP ₁	0	0	0	0	0	0	0	1	1	0
OP ₂	0	1	1	0	0	0	1	1	0	1
OP ₃	0	1	0	0	0	0	0	0	1	1
GEN	1	0	0	0	0	0	0	0	0	1
AGE	1	2	1	1	1	1	1	1	2	2
NS	0	1	0	0	0	0	0	0	0	0
CS	\$974	\$4613	\$377	\$1011	\$773	\$436	\$1163	\$475	\$1687	\$3068
Index Year Cost	\$429	\$28181	\$10468	\$85	\$964	\$7145	\$8534	\$158	\$9583	\$4629
Risk Score for High Cost in TP ₄	1	100	61	3	<1	21	31	1	1	49

Fig. 4

Fig. 5

Listing 1: Example of the use of invisible identifier tags in HTML code

Patient:

<FirstName on Table A>John</FirstName on Table A>

<LastName on Table A>Doe</LastName on Table A>

Phone Number:

<PhoneNumber on Table A>(888) 888-8888</PhoneNumber on Table A>

Fig. 6A

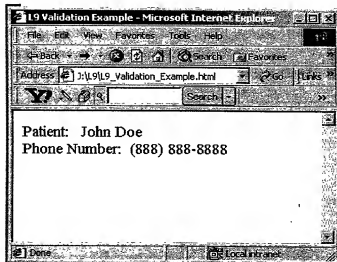


Fig. 6B

Non-compliant Patient Parameters:	
Enrollment	Primary Care Physician
TRICARE Prime	All
MTF	Assigned to Care Manager
All	All
Clinic	
All	
<input type="checkbox"/> Age <input type="checkbox"/> Risk Index <input type="checkbox"/> HbA1c Value	
Order By: <input checked="" type="radio"/> Alphabetically <input type="radio"/> By Risk Index	
<input type="button" value="Generate List"/>	

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NOTE: This is a demo program. The clinical data displayed herein is not associated with any real persons.

Fig. 7

072201

0917228-072901

Save List **Non Compliant Patients**

ALL	Creatinine	HbA1c					
A	B	C	D	E	F	G	H
AADLAND,ERIC A							30
ABA,JOYCE K							60
ABBOTT,RALPH R JR							48
ABELL,DAVID							42
ABELL,DONALD							60
ABELL,JAMES C							30
ABELL,ROLAND J.							36
ACEVEDO,DORIS L							36
ACEVEDO MELISSA M							36

NEXT 100

Non-Compliant Patients: 7119
 Compliant Patients: 424
 Total: 7543

Fig. 8A

Save List **Non Compliant Patients**

ALL	Creatinine	HbA1c
100 - 91	90 - 81	80 - 71
HILL,VIKKI K	99	
PAULSEN,LAMONT	99	
RYALS,PHILLIP E	99	
ESTES,CARRIE L	96	
HAYWOOD,BETTY J	96	
IRWIN,LESTER E.	96	
MARCUM,ROGER N	96	
MCKINNEY,WILLIAM A JR	96	
MILLS CHARLES E	96	

Non-Compliant Patients: 7119
 Compliant Patients: 424
 Total: 7543

Fig. 8B

Enrollment: TRICARE Prime
Clinic: ALL
Provider: ALL

MTF: ALL

Case Manager: ALL

Outreach:

Phone Call

Email / Letter

Protocol	Diagnoses	Assignments	Outreach History	Diabetic?	Contact
Overdue Protocol(s):					
➡ LDL Cholesterol: Due 7/24/2000 : due every 6 months.					
➡ Ophthalmology: Due 12/15/1996 : due every 12 months.					
➡ HbA1c: Due 7/25/2000 : due every 6 months.					
Patient Name: ALVARADO, SAUL R					
Diabetes: Not Confirmed					
Telephone: 555-555-1212					
Address: x xxxx xxxx					
City, State, Zip: xxx xxxx, xx 78242					
FMPSSN: xxxxxxxxx					
DOB: 5/5/40					
Clinic: WHMC TRICARE HMO / BHAA					
MTF: WILFORD HALL					
Enrollment: TRICARE Prime					

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Fig. 9

09917228-072901

00917220.072901

Enrollment:TRICARE Prime
Clinic:ALL

MTF:ALL

Case Manager:ALL

Patient: ALVARADO,SAUL R

<input checked="" type="radio"/> None	<input type="radio"/> No Answer
<input type="radio"/> Left Message	<input type="radio"/> Spoke with Patient
Contact Notes <div></div>	
<input type="button" value="Record Contact"/>	<input type="button" value="Close"/>

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Fig. 10